## DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I believe I am the original, first and sole inventor (if only one name is listed below) or an original and first inventor (if plural inventors are named below) of the subject matter of this application which is entitled:  $HEIGHT-ADJUSTING\ DEVICE\ FOR\ AUTOMOBILE\ SEAT$ 

the specification of which [check one(s) applica-						
was filed as PCT International Application No. <u>PCT/JP2004/005722</u>						
and was amended by Amendment filed	1D 1	(if a	applicable)	; [ or ];		
is attached to this Declaration, Power of A	Attorney and Power to Ir	spect,				
that I have reviewed and understand by any amendment referred to above; and	nd the contents of the ab	ove-identified	application	n, including th	e claims, as amended	
that I acknowledge my duty to accordance with Rule $56(a)$ [37CFR§1.56(a)].	disclose information wh	ich is materia	al to the	examination o	f this application in	
CLAIM UNDER 35 U.S.C. § 119: I hereby cl patent or inventor's certificate listed below certificate having a filing date before that of the	and have also identifi	ed below any	foreign a	19 of any fore pplication for	ign application(s) for patent or inventor's	
Prior Foreign Application(s) Application No. Country		iling Date v - Mo - Year		Priority Claimed Yes – No		
2003-115957 Japan	21, 4, 20	21, 4, 2003		Yes.		
POWER OF ATTORNEY: As inventor, I herebagents with full power of substitution to prose connected therewith: Vincent T. Pace, Reg. No	cute this application and	l to transact al	l business	in the Patent a	nd Trademark Office	
<b>POWER TO INSPECT:</b> I hereby give DANN accredited representatives power to inspect an						
SEND CORRESPONDENCE TO:	CORRESPONDENCE TO: CUSTOMER NUMBER 000110					
DIRECT INQUIRIES TO:	Vincent T. Pace	Tel.: 215-563-4100 / Fax: 215-563-4044			1044	
I hereby declare that all statements made her belief are believed to be true; and further tha the like so made are punishable by fine or imp such willful false statements may jeopardize t	t these statements were risonment, or both, unde	made with the er Section 1001	e knowled; of Title 18	ge that willful of the United	false statements and	
SOLE OR FIRST JOINT INVENTOR		SECOND JOINT INVENTOR (if any)				
Full Name MASAMI YOSH	IDA Fu	ll Name				
First Middle Las	<del></del>		First	Middle	Last	
	. <i>i</i>					
Signature <u>Masami</u> Yoshi	ola sig	gnature	*****			
Date October 31, 200						
Residence Tochigi JAPAN	Re	esidence				
City State or Co	ountry		City	State	or Country	
Citizenship JAPAN	Ci	tizenship			73 <u>- 1744</u>	
Post Office Address:	Po	st Office Add	lress:			
c/o Technical Center, TS TECH Co., J	<u>Ltd. 118·1,</u>			W.J.	P*	
Oaza Ota, Takanezawa machi, Shioy	a-gun,			······································		
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